Case 19-25219-ABA Doc 54 Filed 12/04/20 Entered 12/04/20 13:52:56 Desc Main Document Page 1 of 7

Fill in this information to identify your case:						
Debtor 1	Mark A. Downing					
	First Name	Middle Name	Last Name			
Debtor 2	Nadine A. Downir	ng				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number	19-25219					

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	es complete and accurate as possible. If two married people are filing together, both are equally responsible fo rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Pai	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	160,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	31,575.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	191,575.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	163,002.08
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,988.05
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,911.50
	Your total liabilities	\$	203,901.63
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,072.88
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,376.83
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	hox and s	ubmit this form to

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Debtor 1 Mark A. Downing
Debtor 2 Nadine A. Downing

Case number (if known) 19-25219

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,848.37

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,988.05
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,988.05

Fill in this informa	ation to identify your case:	
Debtor 1	Mark A. Downing	
Debtor 2 (Spouse, if filing)	Nadine A. Downing	
United States Ba	nkruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number	19-25219	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,		☐ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed
	employers.	Occupation		
	Include part-time, seasonal, or self-employed work.	Employer's name		
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed th	nere?	
Pari	Give Details About Mon	othly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 0.00 0.00

Official Form 106I Schedule I: Your Income page 1

	tor 1 tor 2	Mark A. Downing Nadine A. Downing		Case	e number (if known)	_1	9-25219		
				Fo	r Debtor 1		For Debtor non-filing s		
	Cop	y line 4 here	4.	\$_	0.00		\$	0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00		\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00		\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00		\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00		\$	0.00	
	5e.	Insurance	5e.	\$	0.00		\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00		\$	0.00	
	5g.	Union dues	5g.	\$_	0.00		\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$_	0.00	+	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00		\$	0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00		\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00		\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00		\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00		\$	0.00	
	8e.	Social Security	8e.	\$-	0.00		\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Workers Comp	8f.	\$_	0.00		\$ 2,	572.88	
		P. 1.00		•			•		
	9.4	Disability Pension or retirement income	- 00	\$_ \$	2,500.00		\$	0.00	
	8g. 8h.	Other monthly income. Specify:	8g. 8h.+	٠ _	0.00			0.00	
	011.		_ ''''	Ψ_	0.00			0.00	¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,500.00		\$2	2,572.88	3
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,500.00 + \$		2,572.88	= \$	5,072.88
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your firliends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend						0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies						\$	5,072.88
									y income
13.		you expect an increase or decrease within the year after you file this form? No.	?						
		Yes. Explain:							

	in this inform	ation to identify w				I		
FIII	in this inform	nation to identify yo	our case:					
Deb	tor 1	Mark A. Dow	ning			Che	eck if this is:	
Dah	tor O	N. II. A B					An amended filing	.i.a. a.a.ata.atiti.a. ah.a.ata.a
	tor 2 ouse, if filing)	Nadine A. D	owning					wing postpetition chapter the following date:
``	,	Junioration Court for the	. DISTR	ICT OF NEW JERSEY			MM / DD / YYYY	
			. DISTR	ICT OF NEW JERSET			WIWI/DD/TTTT	
1	e number	19-25219						
Of	fficial F	orm 106J						
So	chedul	e J: Your	Exper	nses				12/15
Be info	as complete ormation. If	e and accurate as	s possible eded, atta	. If two married people ar ach another sheet to this				
Par		cribe Your House	ehold					
1.	Is this a jo							
	□ No. Go	to line 2. bes Debtor 2 live	in a cono	rote haveabald?				
			ın a sepai	ate nousenoid?				
	_	No Yes. Debtor 2 mu:	st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	btor 2.	
2.	Do you ha	ve dependents?	■ No					
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not stat	te the						□ No
	dependent	s names.						Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses	xpenses include of people other t nd your depende	han r	l _{No} l _{Yes}				
Par Est	t 2: Esti	mate Your Ongoi	ng Month	ly Expenses uptcy filing date unless y	ou are using this fo	orm as a s	upplement in a Cha	apter 13 case to report
	enses as of plicable date		bankrupto	cy is filed. If this is a supp	lemental Schedule	J, check t	the box at the top o	of the form and fill in the
the		ch assistance an		government assistance i cluded it on Schedule I: Y			Your exp	enses
4.		or home owners		nses for your residence. In or lot.	nclude first mortgage	e 4.	\$	977.83
	If not inclu	uded in line 4:						
	4a. Rea	l estate taxes				4a.	\$	0.00
		erty, homeowner'				4b.	·	0.00
		ne maintenance, re				4c.		170.00
5.		neowner's associa		dominium dues our residence. such as ho	me equity loans	4d. 5.	·	0.00 0.00

	. Downing A. Downing	Case number (if know	wn) 19-25219
6. Utilities:			
6a. Electricit	y, heat, natural gas	6a. \$	300.00
,	ewer, garbage collection	6b. \$	125.00
•	ne, cell phone, Internet, satellite, and cable services	6c. \$	274.00
6d. Other. S	pecify: Cell phone	6d. \$	250.00
Gas		\$	100.00
Food and hou	sekeeping supplies	7. \$	700.00
Childcare and	children's education costs	8. \$	0.00
Clothing, laun	dry, and dry cleaning	9. \$	200.00
). Personal care	products and services	10. \$	150.00
. Medical and d	ental expenses	11. \$	50.00
	n. Include gas, maintenance, bus or train fare.	40 0	400.00
Do not include		12. \$	
	t, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
	ntributions and religious donations	14. \$	50.00
5. Insurance.	insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insu		15a. \$	0.00
15b. Health in		15a. \$	0.00
15c. Vehicle		15c. \$	400.00
	surance. Specify: Motorcycle Insurance	15d. \$	80.00
	include taxes deducted from your pay or included in lines 4 or 20.		80.00
Specify:		16. \$	0.00
	lease payments: ments for Vehicle 1	17a. \$	0.00
	nents for Vehicle 2	17b. \$	0.00
17c. Other. S	necify:	17c. \$	0.00
17d. Other. S		17d. \$	0.00
	s of alimony, maintenance, and support that you did not repor		0.00
	n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10		0.00
	ts you make to support others who do not live with you.	\$	0.00
Specify:		19.	
. Other real pro	perty expenses not included in lines 4 or 5 of this form or on 5	Schedule I: Your Incon	ne.
20a. Mortgag	es on other property	20a. \$	0.00
20b. Real est	ate taxes	20b. \$	0.00
	, homeowner's, or renter's insurance	20c. \$	0.00
20d. Mainten	ance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeov	ner's association or condominium dues	20e. \$	0.00
. Other: Specify	:	21. +\$	0.00
Calculate vou	r monthly expenses		
22a. Add lines	· ·	\$	4,376.83
	22 (monthly expenses for Debtor 2), if any, from Official Form 106.		4,376.63
			4 070 00
ZZC. Add line Z	2a and 22b. The result is your monthly expenses.	\$	4,376.83
3. Calculate you	r monthly net income.		
-	e 12 (your combined monthly income) from Schedule I.	23a. \$	5,072.88
	ur monthly expenses from line 22c above.	23b\$	4,376.83
			,
	your monthly expenses from your monthly income.		606.05
The resu	ılt is your monthly net income.	23c. \$	696.05
For example, do	t an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect e terms of your mortgage?		o increase or decrease because of a
☐ Yes.	Explain here:		

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United States Bankruptcy CourtDistrict of New Jersey

In re	Mark A. Downing Nadine A. Downing		Case No.	19-25219	
		Debtor(s)	 Chapter	13	

AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing, consisting of _	0	page(s), and that they
are true and correct to the best of my knowledge, information, and belief.		

Date	December 4, 2020	Signature	/s/ Mark A. Downing Mark A. Downing Debtor	
Date	December 4, 2020	Signature	/s/ Nadine A. Downing	
			Nadine A. Downing	
			Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.